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Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

0010/PTO Rev. 6/95	U.S. Department of Commerce Patent and Trademark Office	Attorney Docket Number	M 6820 HST/NI PCT/US
		First Named Inventor	Nakada, Kazuya
		COMPLETE IF KNOWN	
		Application Number	
		Filing Date	
		Group Art Unit	
DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION		Examiner Name	
<input type="checkbox"/> Declaration Submitted with Initial Filing OR <input checked="" type="checkbox"/> Declaration Submitted after Initial Filing			

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

HYDROPHILIZING AGENT FOR METALLIC MATERIAL, HYDROPHILIZING FLUID, METHOD OF HYDROPHILIZING, METALLIC MATERIAL, AND HEAT EXCHANGER

(Title of the Invention)

the specification of which

☐ is attached hereto

OR

☒

was filed on (MM/DD/YYYY)

10/8/1999

as United States Application Number or PCT International

Application Number

PCT/JP99/05652

and was amended on (MM/DD/YYYY)

(if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37 Code of Federal Regulations, § 1.56.

I hereby claim foreign priority benefits under Title 35, United States Code §119(a)-(d) or §365(b) of any foreign application(s) for patent or inventor's certificate, or §365(a) of any PCT International application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT International application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority		Certified Copy Attached?	
			Not Claimed		YES	NO
10/293656 11/288204	Japan Japan	10/15/1998 10/ 8/1999	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority sheet attached hereto:

I hereby claim the benefit under Title 35, United States Code §119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority sheet attached hereto.

Burden Hour Statement: This form is estimated to take .4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington DC 20231.

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DECLARATION**Page 2**

I hereby claim the benefit under Title 35, United States Code §120 of any United States application(s), or §365© of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of Title 35, United States Code §112.1 acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application Number	PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)
	PCT/JP99/05652	10/8/1999	

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority sheet attached hereto.

As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

☐ Firm Name Customer Number or label

☒ List Attorney(s) and/or agent(s) name and registration number below:

Name	Registration Number	Name	Registration Number
Wayne C. Jaeschke	21,062	BEST AVAILABLE COPY	
Glenn E. J. Murphy	33,539		
Stephen D. Harper	33,243		
Kimberly R. Hild	39,224		

☐ Additional attorney(s) and/or agent(s) named on a supplemental sheet attached hereto.

Please direct all correspondence to: ☒ Customer Number or label **00423** OR ☒ Fill in correspondence address below

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name	Kazuya	Middle Initial		Family Name	Nakada	Suffix e.g. Jr.	
Inventor's Signature						Date	
Residence: City	Tokyo	State		Country	Japan	Citizenship	Japan
Post Office Address	Nihonbashi 1-chome, Chuo-ku						
Post Office Address							
City	Tokyo103-0027	State		Zip		Country	Japan
						Applicant Authority	
<input checked="" type="checkbox"/> Additional inventors are being named on supplemental sheet(s) attached hereto -							

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DECLARATION										ADDITIONAL INVENTOR(S) Supplemental Sheet						
Name of Additional Joint Inventor, if any:						<input type="checkbox"/> A petition has been filed for this unsigned inventor										
Given Name	Takuo			Middle Initial			Family Name	Murai			Suffix e.g. Jr.					
Inventor's Signature							Date									
Residence: City		Tokyo			State				Country		Japan		Citizenship		Japan	
Post Office Address		Hongo 2-chome, Bunkyo-ku														
Post Office Address																
City	Tokyo 113-0033			State			Zip			Country		Japan		Applicant Authority		
Name of Additional Joint Inventor, if any:						<input type="checkbox"/> A petition has been filed for this unsigned inventor										
Given Name				Middle Initial			Family Name				Suffix e.g. Jr.					
Inventor's Signature							Date									
Residence: City					State				Country				Citizenship			
Post Office Address																
Post Office Address																
City				State			Zip			Country				Applicant Authority		
Name of Additional Joint Inventor, if any:						<input type="checkbox"/> A petition has been filed for this unsigned inventor										
Given Name				Middle Initial			Family Name				Suffix e.g. Jr.					
Inventor's Signature							Date									
Residence: City					State				Country				Citizenship			
Post Office Address																
Post Office Address																
City				State			Zip			Country				Applicant Authority		
Name of Additional Joint Inventor, if any:						<input type="checkbox"/> A petition has been filed for this unsigned inventor										
Given Name				Middle Initial			Family Name				Suffix e.g. Jr.					
Inventor's Signature							Date									
Residence: City					State				Country				Citizenship			
Post Office Address																
Post Office Address																
City				State			Zip			Country				Applicant Authority		
Name of Additional Joint Inventor, if any:						<input type="checkbox"/> A petition has been filed for this unsigned inventor										
Given Name				Middle Initial			Family Name				Suffix e.g. Jr.					
Inventor's Signature							Date									
Residence: City					State				Country				Citizenship			
Post Office Address																
Post Office Address																
City				State			Zip			Country				Applicant Authority		
<input type="checkbox"/> Additional inventors are being named on supplemental sheet(s) attached hereto																